## FORM 10 LABOUR RELATIONS BOARD (PRINCE EDWARD ISLAND) REPLY TO APPLICATION FOR REVOCATION OF CERTIFICATION

BETWEEN:	
AND:	APPLICANT
	RESPONDENT
1. Name of respondentAddress	
2. Name of employer of the employees affected b	by this application
Address of employer	
3. The respondent is or was a party to or bound by is enclosed herewith, with	
	(name of employer)
that, (a) was signed on the day of	., 20
(b) became effective on the day of and (c) contains the following provision for te	
4. State grounds for opposition to application:	
I hereby declare that the statements made and infinity fact and I make this solemn declaration conscients it is of the same force and effect as if made ure. S.P.E.I. 1988 Cap. E-11.  DECLARED by the	entiously believing it to be true, and knowing ander oath and by virtue of the <i>Evidence Act</i>
before me at in the County of Province of this day of20	) ) )
A Commissioner for taking affidavits in the Supreme Court	Respondent

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Title